PTO/SB/17 (12-04v2)
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| Under the Paperwork Redu | respond to a collection of information unless it displays a valid OMB control number | | | | | | | |
|--|--|---------------------|--------------|--|-------------------------|-----------------------------------|-------------------|--------------------------|
| Effective on 1200-000-000-000-000-000-000-000-000-000 | | | | Complete if Known Application Number 09/832,663-Conf. #1850 | | | | |
| | | | | | | | | |
| FEE TRANSMITTAL | | | | | | April 11, 2001 Allyson Beuhler | | |
| For FY 2005 | | | | First Named Inv | | I. C. Yang | | |
| | | | | 4 | | <u>-</u> | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | Art Unit | | 641 | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,810.00 Attorney Docket No. 106570-0002 | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
| X Check Credit Card Money Order None Other (please identify): | | | | | | | | |
| Deposit Account Deposit Account Number: 141449 Deposit Account Name: Nutter McClennen & Fish LLP | | | | | | | | |
| | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARC | • | | | | | | _ | |
| | | G FEES Small Entity | SEA | RCH FEES Small Entity | EXAMIN | ATION FEES Small Entity | 5 | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | | Fee (\$) | Fee (\$) | Fees P | aid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | = | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | | | | | | | Fee (\$) | Small Entity Fee (\$) |
| Fee Description Each claim over 20 (include | lina Reissues) | | | | | | 50 | 25 |
| Each independent claim ov | | | | | | | 200 | 100 |
| Multiple dependent claims | | <i>G</i>) | | | | | 360 | 180 |
| Total Claims Extra Claims Fee (\$) Fee F | | | Paid (\$) Mu | | Itiple Dependent Claims | | | |
| - 20 = x = | | | • | Fee | | | | |
| | | | | | | - | | _ |
| | | ee (\$) | Fee P | aid (\$) | | | | |
| -3= | × _ | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| | xtra Sheets | | | Iditional 50 or frac | | | Fee F | Paid (\$) |
| - 100 = | | /50 | | (round up to a who | ole number) | · | | D-1-1 (A) |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00 | | | | | | | | |
| other (e.g., late filling s | | | | nued examinat | | (see 37 | 79 | 0.00 |
| SUBMITTED BY | | | | | | | | |
| Signature | X | | | Registration No. (Attorney/Agent) | 38,664 | Telephone | (617) 439 | -2000 |
| Name (Print/Type) George | A. Kixh | | | (memory genry | | Date | November 18, 2005 | |
| | | | | | | | | |
| Fee Transmittal | | | | | | | | |
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in | | | | | | | | |
| an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | | | | | | | | |
| Dated: November 18, 2005 Signature: (George A. Xixis) | | | | | | | | |
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